

## Supplemental Application Data Sheet

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	205/170
Suggested Group Art Unit::	1753
CD-ROM or CD-R?::	None
Title::	Biolithographical Deposition and Materials and Devices Formed Therefrom
Attorney Docket Number::	2105.0013C
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	10
Small Entity::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Gregory  
Middle Name:: F.  
Family Name:: Payne  
City of Residence:: Cockeysville  
State or Province of Residence:: MD  
Country of Residence:: US  
Street of mailing address:: 1803 Miller Road  
City of mailing address:: Cockeysville  
State or Province of mailing address:: MD  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 21030

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Gary  
Middle Name:: W.  
Family Name:: Rubloff  
City of Residence:: Clarksville  
State or Province of Residence:: MD  
Country of Residence:: US  
Street of mailing address:: 13720 Springdale Drive  
City of mailing address:: Clarksville

State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	21029
Applicant Authority type::	Inventor
Primary Citizenship Country::	Korea
Status::	Full Capacity
Given Name::	Hyunmin
Family Name::	Yi
City of Residence::	<b>Beltsville</b>
	<b><u>Lexington</u></b>
State or Province of Residence::	<b><del>MD</del></b>
	<b><u>MA</u></b>
Country of Residence::	US
Street of mailing address::	<b><del>3907 Lakehouse Road #13</del></b>
	<b><u>15 Westwood Rd.</u></b>
City of mailing address::	<b>Beltsville</b>
	<b><u>Lexington</u></b>
State or Province of mailing address::	<b><del>MD</del></b>
	<b><u>MA</u></b>
Country of mailing address::	US
Postal or Zip Code of mailing address::	<b><del>20705</del></b>
	<b><u>02420</u></b>
Applicant Authority type::	Inventor
Primary Citizenship Country::	India
Status::	Full Capacity
Given Name::	Rohan
Family Name::	Fernandes
City of Residence::	Beltsville

State or Province of	MD
Residence::	
Country of Residence::	US
Street of mailing address::	11366 Evans Trail, Apt. 104
City of mailing address::	Beltsville
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	20705
Applicant Authority type::	Inventor
Primary Citizenship Country::	China
Status::	Full Capacity
Given Name::	Li-Qun
Family Name::	Wu
City of Residence::	<b><u>Hyattsville</u></b> <b><u>North Potomac</u></b>
State or Province of	MD
Residence::	
Country of Residence::	US
Street of mailing address::	<del>3427 Tulane Drive #14</del> <b><u>10500 Prairie Landing Ter.</u></b>
City of mailing address::	<b><u>Hyattsville</u></b> <b><u>North Potomac</u></b>
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	<del>20783</del> <b><u>20852</u></b>
Applicant Authority type::	Inventor
Primary Citizenship Country::	Iran

Status::	Full Capacity
Given Name::	Reza
Family Name::	Ghodssi
City of Residence::	<b>Rockville</b>
	<b><u>Silver Spring</u></b>
State or Province of Residence::	MD
Country of Residence::	US
Street of mailing address::	<del>5805 Edson Lane #203</del>
	<b><u>2511 Harmon Road</u></b>
City of mailing address::	<b>Rockville</b>
	<b><u>Silver Spring</u></b>
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	<del>20852</del>
	<b><u>20902</u></b>
Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	William
Middle Name::	E.
Family Name::	Bentley
City of Residence::	Annapolis
State or Province of Residence::	MD
Country of Residence::	US
Street of mailing address::	909 White Marlin Way
City of mailing address::	Annapolis
State or Province of mailing address::	MD

Country of mailing address:: US  
Postal or Zip Code of mailing address:: 21401

**Correspondence Information**

Correspondence Customer Number: 56585

**Representative Information**

Representative Designation::	Registration Number::	Representative Name::
Primary	32680	Jeffrey I. Auerbach

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2004/004 853	02/20/2004
This Application	An application claiming the benefit under 35 USC 119(e)	60/528,856	12/11/2003

**Assignee Information**

Assignee Name:: University of Maryland,  
College Park  
Street of mailing address:: 6200 Baltimore Avenue, Suite

300  
City of mailing address:: Riverdale  
State or Province of mailing MD  
address::  
Country of mailing address:: US  
Postal or Zip Code of mailing 20737  
address::